	Case 16	6-13345-B	FK Doc 20) Fi	led 11/02/1	L6 Entered 11/0	02/16 12	:35:52	Desc Main
Fill	in this informa	tion to identify	your case and t	his filin	g:	Dado I of 52			
Det	otor 1	Edward Shi							
Det	otor 2	First Name	Middl	e Name		Last Name			
	use, if filing)	First Name	Middle	e Name		Last Name			
Uni	ted States Bankı	ruptcy Court for	the: EASTERN	DISTR	ICT OF VIRGIN	IA			
Cas	se number <u>16</u>	-13345							Check if this is amended filing
S C n ea hink nfor	it fits best. Be a	A/B: Pi arately list and d s complete and pace is needed,	roperty escribe items. List	le. If two	married people a	asset fits in more than on are filing together, both are top of any additional page	e equally resp	onsible for s	upplying correct
	No. Go to Part 2. Yes. Where is the			, 100.0	, wantang, a	and, or similar property?			
1.1				What	t is the property?	Charle att that annie			
•••	6330 Koweta	Road		vviiai	t is the property? Single-family ho		Do not dod		-1
	Street address, if av	allable, or other des	cription	_ 	Duplex or multi-	unit building	the amount	of any secure	aims or exemptions. Put dicial claims on Schedule D: ms Secured by Property.
	Cairbar	CA	20242 0000		Manufactured or	mobile home	Current va	lue of the	Current value of the
	Fairburn City	GA State	30213-0000 ZIP Code		Land Investment prop	ortu	entire prop	erty? 10.000.00	portion you own? \$90,000.0
	,		2.11 0000		Timeshare Other		Describe ti	ne nature of y	our ownership interest ancy by the entireties, o
				Wno	Debtor 1 only	the property? Check one	Fee sim	-,,	
	Fulton				Debtor 2 only				
	County				Debtor 1 and De	ebtor 2 only	- Check	if this is con	nmunity property
						ne debtors and another wish to add about this ite number:	(see ins	tructions)	y proporty

If you own or have more than one, list he 54 Foothill Lane			What is the property? Check all that apply				
	Street address, if available, or other description		Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
Harpers Ferry	WV State	25425-0000 ZIP Code		Current value of the entire property? \$160,000.00	Current value of the portion you own?		
1.55			Who has an interest in the property? Check one Debtor 1 only	Describe the nature of y (such as fee simple, ten a life estate), if known.			
Jefferson County			Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this itel	Check if this is com	nmunity property		
If you own or ha	ve more	than one, list h	What is the property? Check all that apply	Do not deduct secured cla	aims or exemptions. Put		
53 Foothill Lane			nere:	Do not deduct secured cla	alms or exemptions. Put		
-			nere: What is the property? Check all that apply	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:		
53 Foothill Lane			What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?		
53 Foothill Lane Street address, if available Harpers Ferry	, or other des	ecription 25425-0000	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$30,000.00 Describe the nature of y (such as fee simple, tenalife estate), if known.	current value of the portion you own? \$30,000.0		
53 Foothill Lane Street address, if available Harpers Ferry	, or other des	ecription 25425-0000	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$30,000.00 Describe the nature of y (such as fee simple, ten	current value of the portion you own? \$30,000.0		
53 Foothill Lane Street address, if available Harpers Ferry City	, or other des	ecription 25425-0000	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$30,000.00 Describe the nature of y (such as fee simple, tenalife estate), if known.	current value of the portion you own? \$30,000.0 Substitute of the portion you own?		
53 Foothill Lane Street address, if available Harpers Ferry City Jefferson	, or other des	ecription 25425-0000	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$30,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. fee simple Check if this is com (see instructions)	current value of the portion you own? \$30,000.0 Substitute of the portion you own?		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

	hihadeh Document Page 4 of 53 _{Case numb}	er (ir known) _16-13345
 Z. Electronics Examples: Televisions including of □ No ■ Yes. Describe 	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanno cell phones, cameras, media players, games	
	TV, laptop, ipad, and cell phone and stereo, and printer	\$1,000.00
3. Collectibles of value Examples: Antiques a other colle □ No ■ Yes. Describe	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; ctions, memorabilia, collectibles	stamp, coin, or baseball card collections;
	Books and wall art	\$100.00
Equipment for sports Examples: Sports, pho musical ins No Yes. Describe	ptographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, sk	kis; canoes and kayaks; carpentry tools;
	Skis and ski equipment	\$200.00
□ No ■ Yes. Describe	les, shotguns, ammunition, and related equipment	
☐ No ☐ Yes. Describe 1. Clothes	Rifle clothes, furs, leather coats, designer wear, shoes, accessories	\$500.00
□ No ■ Yes. Describe 1. Clothes Examples: Everyday □ No	Rifle	\$500.00
☐ No ☐ Yes. Describe 1. Clothes Examples: Everyday ☐ No ☐ Yes. Describe	Rifle clothes, furs, leather coats, designer wear, shoes, accessories	\$400.00
□ No ■ Yes. Describe 1. Clothes Examples: Everyday □ No ■ Yes. Describe 2. Jewelry Examples: Everyday □ No	Rifle clothes, furs, leather coats, designer wear, shoes, accessories clothing	\$400.00
□ No ■ Yes. Describe 1. Clothes Examples: Everyday □ No ■ Yes. Describe 2. Jewelry Examples: Everyday □ No	Rifle clothes, furs, leather coats, designer wear, shoes, accessories clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch	\$400.00 ses, gems, gold, silver
□ No ■ Yes. Describe 1. Clothes Examples: Everyday □ No ■ Yes. Describe 2. Jewelry Examples: Everyday □ No	Rifle clothes, furs, leather coats, designer wear, shoes, accessories clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch Wedding ring Watch	\$400.00 es, gems, gold, silver \$500.00

C	Case 16-13345-BFK		Filed 11/02/16 Entered	11/02/16 12:35:5	2 Desc Main 8:13AM
Debtor 1	Edward Shihadeh		Document Page 5 of 5	3 Case number (if known)	16-13345
☐ Yes.	. Give specific information				
15. Add for P	the dollar value of all of your Part 3. Write that number here	entries from i	art 3, including any entries for page	es you have attached	\$5,301.00
Part 4: De	escribe Your Financial Assets				
	wn or have any legal or equit	able interest ir	any of the following?		Current value of the
	rantura (h. 1916). Sintera (h. 1916).				portion you own? Do not deduct secured claims or exemptions.
16. Cash Exam	pples: Money you have in your v	vallet, in your h	ome, in a safe deposit box, and on han	d when you file your petition	on
■ No □ Yes.		•••••			
	sits of money ples: Checking, savings, or othe institutions. If you have m	er financial acc sultiple accounts	ounts; certificates of deposit; shares in with the same institution, list each.	credit unions, brokerage h	ouses, and other similar
Yes.	•••••		Institution name:		
	17.1. ch	ecking	Bank of America checking 3767	g account ending in	\$1,500.00
			nt consisting of stock/mutual fu managed by UBS	ınds set up for	\$6,200.00
	<u></u>	Ameritrade a	ccount		\$80.00
19. Non-pr joint v □ No	ublicly traded stock and inter venture	rests in incorp	orated and unincorporated business	ses, including an interest	in an LLC, partnership, and
■ Yes.	Give specific information abou		••••		
	Name of	r entity:		% of ownership:	
	<u>Verizo</u>	n Stock		%	\$1.00
Negoti Non-n ■ No	iable instruments include perso	enal checks, case by you cannot tra	tlable and non-negotiable instrume hiers' checks, promissory notes, and r nsfer to someone by signing or deliver	noney orders.	
<i>Exam</i> µ □ No		(eogh, 401(k), 4	03(b), thrift savings accounts, or other	pension or profit-sharing p	olans
■ Yes.	List each account separately. Type of account separately.	count:	Institution name:		
	IRA		Roth IRA managed by UBS	S	\$1,400.00

Edward Shihadeh Debtor 1

		401K	401K account at work	\$10,000.00
22	Examples: Agreems	used deposits you have	e made so that you may continue service or use from a company bald rent, public utilities (electric, gas, water), telecommunications companies, or oth	ners
	■ No □ Yes		Institution name or individual:	
23	S. Annuities (A contract	ct for a periodic paymer	nt of money to you, either for life or for a number of years)	
	☐ Yes	Issuer name and desc	cription.	
24	linterests in an educ 26 U.S.C. §§ 530(b)(■ No	ation IRA, in an accou 1), 529A(b), and 529(b)	unt in a qualified ABLE program, or under a qualified state tuition program. (1).	
	☐ Yes	Institution name and d	description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	■ No		operty (other than anything listed in line 1), and rights or powers exercisable	or your benefit
	☐ Yes. Give specific	information about then	n	
26	Examples: Internet of No	s, trademarks, trade se domain names, website information about them	ecrets, and other intellectual property s, proceeds from royalties and licensing agreements n	
27	Examples: Building No	es, and other general in permits, exclusive licent information about them	ses, cooperative association holdings, liquor licenses, professional licenses	
M	oney or property owe	ed to you?	port	rent value of the ion you own? not deduct secured ns or exemptions.
28	. Tax refunds owed t	o vou		•
	■ No	-	, including whether you already filed the returns and the tax years	
29	. Family support Examples: Past due ■ No □ Yes. Give specific		spousal support, child support, maintenance, divorce settlement, property settlemen	. t
30	benefits;	/ages, disability insuran unpaid loans you made	ce payments, disability benefits, sick pay, vacation pay, workers' compensation, So e to someone else	ocial Security
	☐ Yes. Give specific	information		
31	. Interests in insuran Examples: Health, d	ce policles isability, or life insuranc	ee; health savings account (HSA); credit, homeowner's, or renter's insurance	

Beneficiary:

 $\hfill\square$ Yes. Name the insurance company of each policy and list its value. Company name:

Surrender or refund

value:

Official Form 106A/B

Schedule A/B: Property

page 7

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Fill in this infor	mation to identify your	case:			
Debtor 1	Edward Shihadel	1			
	First Name	Middle Name	Last Name	•	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number	16-13345				
(if known)					Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp
--

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief, description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim sek only one box for each exemption.	Specific laws that allow exemption
53 Foothill Lane Harpers Ferry, WV 25425 Jefferson County	\$30,000.00	\$1.00	Va. Code Ann. § 34-4
3/4 of an acre of land sitting adjacent to the home with a well and perked for septic Line from Schedule A/B: 1.3		100% of fair market value, up to any applicable statutory limit	
Tiger Motorcyle 2013 Tumiph 3,000 miles	\$10,000.00	\$999.00	Va. Code Ann. § 34-4
fianaced Line from Schedule A/B: 3.1		100% of fair market value, up to any applicable statutory limit	
Trailer 2010 Coleman Camper/pop up trailer	\$3,000.00	\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 3.2		100% of fair market value, up to any applicable statutory limit	
Silverado 2007 Chevy 1500 extended cab 150,000 miles	\$12,000.00	\$6,000.00	Va. Code Ann. § 34-26(8)
paid off Line from Schedule A/B: 3.3		100% of fair market value, up to any applicable statutory limit	
Silverado 2007 Chevy 1500 extended cab 150,000 miles	\$12,000.00	\$4,000.00	Va. Code Ann. § 34-4
paid off Line from Schedule A/B: 3.3		100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
day to the state of	Copy the value from . Schedule A/B	- Che	ock only one box for each exemption	
Miscelaneous houehold goods and furnishings	\$2,500.00		\$2,500.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Rifle Line from Schedule A/B: 10.1	\$500.00		\$500.00	Va. Code Ann. § 34-26(4b)
Zine iioni esinedale 745.			100% of fair market value, up to any applicable statutory limit	
clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	Va. Code Ann. § 34-26(4)
Zino non conceano / v.b.			100% of fair market value, up to any applicable statutory limit	
Wedding ring Line from Schedule A/B: 12.1	\$500.00		\$500.00	Va. Code Ann. § 34-26(1a)
Line II off Scriedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit	
Dog Line from Schedule A/B: 13.1	\$1.00	•	\$1.00	Va. Code Ann. § 34-26(5)
Zino nom odyloudo yyb. 10.1			100% of fair market value, up to any applicable statutory limit	
checking: Bank of America checking account ending in 3767	\$1,500.00		\$1,000.00	Va. Code Ann. § 34-29
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
IRA: Roth IRA managed by UBS Line from Schedule A/B: 21.1	\$1,400.00		\$1,400.00	Va. Code Ann. § 34-34
Line Holli Schedule 7/B. 21.1			100% of fair market value, up to any applicable statutory limit	
401K: 401K account at work Line from Schedule A/B: 21.2	\$10,000.00		\$10,000.00	Va. Code Ann. § 34-34
Elle Holl Gollouis PVB. 21.2			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3	of more than \$160,37	5? Ises fi	led on or after the date of adjustme	nt.)
■ No			·	•
Yes. Did you acquire the property covere No	d by the exemption wi	thin 1	215 days before you filed this case	?
☐ Yes				

Case 16-13345-BFh	C Doc 20 Filed 11/02/16 En	itered 11/02/16	12:35:52 Des	SC Main 11/02/16 8:13A
Fill in this information to identify yo		0 of 53		11/02/16 8:13A
Debtor 1 Edward Shihad				
First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name		_	
United States Bankruptcy Court for the	EASTERN DISTRICT OF VIRGINIA		-	
Case number 16-13345 (if known)			_	if this is an led filing
Official Form 106D				•
Schedule D: Creditors	Who Have Claims Secure	d by Propert	v	12/15
is needed, copy the Additional Page, fill it number (if known). 1. Do any creditors have claims secured b	this form to the court with your other schedules.	On the top of any additio	nal pages, write your na	tion. If more space me and case
Part 1: List All Secured Claims		Column A	Column B	Calumn C
List all secured claims. If a creditor has for each claim. If more than one creditor has much as possible, list the claims in alphabet	more than one secured claim, list the creditor separatel s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Chase Mtg	Describe the property that secures the claim:	\$57,623.00	\$160,000.00	\$0.00
Creditor's Name	54 Foothill Lane Harpers Ferry, WV 25425 Jefferson County			
Po Box 24696 Columbus, OH 43224	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Un!iquidated			
Who owes the debt? Check one.	☐ Disputed Nature of Ilen. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or se car loan)	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 09/01 Last Active Date debt was incurred 8/01/16	Last 4 digits of account number 6540			
2.2 Freedom Road Financial Creditor's Name	Describe the property that secures the claim:	\$7,511.00	\$10,000.00	\$0.00
Ordalis a Name	Tiger Motorcyle 2013 Tumiph 3,000 miles fianaced			
10509 Professional Cir S Reno, NV 89521	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or se	cured		

Official Form 106D

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Statutory lien (such as tax lien, mechanic's lien)

car loan)

☐ Judgment lien from a lawsuit

Desc Main 8:13AM Case 16-13345-BFK Doc 20 Filed 11/02/16 Entered 11/02/16 12:35:52 Document Page 11 of 53 Debtor 1 Edward Shihadeh Case number (if know) 16-13345 First Name Middle Name Last Name ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Opened 02/15 Last Active Date debt was incurred 9/01/16 0959 Last 4 digits of account number 2.3 Wells fargo Describe the property that secures the claim: \$110,000.00 \$90,000.00 \$0.00 Creditor's Name 6330 Koweta Road Fairburn, GA 30213 Fulton County As of the date you file, the claim is: Check all that 3476 Stateview Blvd apply. Fort Mill, SC 29715 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number Wells Fargo Bank Nv Na Describe the property that secures the claim: \$118,118.00 \$160,000.00 \$0.00 Creditor's Name 54 Foothill Lane Harpers Ferry, WV 25425 Jefferson County As of the date you file, the claim is: Check all that Po Box 31557 Billings, MT 59107 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ■ Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Opened 03/06 Last Active 1998 Date debt was incurred 2/05/16 Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here: if this is the last page of your form, add the dollar value totals from all pages.

\$293,252.00

\$293,252,00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

Debtor 1 Edward Shihadeh
First Name Middle Name Last Name

Name, Number, Street, City, State & Zip Code
Phelan Law Firm
11675 Great Oaks Way,
suite 375
Grantville, GA 30220

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Case number (if know)

16-13345

On which line in Part 1 did you enter the creditor? 2.4

Last 4 digits of account number ____

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	Case 1	.6-13345-BFK	Doc 20	Filed 11/02/		ed 11/02/16	12:3	35:52	Des	с Мајр _{ии 8:13АМ}
Fil	l in this inform	ation to identify your	case:)ooumont	Dogo 12.6	A.E.O				
De	btor 1	Edward Shihadeh	·							
		First Name	Middle Na	me	Last Name		-			
	btor 2 ouse if, filing)	First Name	Middle Na	me	Last Name		-			
l In	ited States Bank	kruptcy Court for the:		ISTRICT OF VIRG						
	ited Otales Dail	nupley Court for the.	EASTERNE	ISTRICT OF VIRG	DINIA		-			
	se number 10	6-13345		-						
(11 14	nowny									if this is an ed filing
		1007/7	· · · · · · · · · · · · · · · · · · ·						amend	ed ming
	ficial Form				.					
		F: Creditors W								12/15
Sch Sch left. nam	edule G: Executoredule D: Creditor Attach the Contline and case numb	,	ired Leases (Off ured by Propert e. If you have n	icial Form 106G). Do y. If more space is n o information to rep	o not include any leeded, copy the l	creditors with parti Part you need, fill it	ally se out, n	cured claim	ms that a entries in	re listed in
_		of Your PRIORITY Un s have priority unsecured								
••	No. Go to Par		a ciaims agains	t you?						
	Yes.									
2.	List all of your p identify what type possible, list the	priority unsecured claims of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	s both priority an r according to th	d nonpriority amounts e creditor's name. If v	s, list that claim he: ou have more thar	re and show both pric	ority an	d nonpriorit	v amount	s. As much as
	(For an explanati	on of each type of claim, s	ee the instruction	ns for this form in the i	instruction booklet.					
	7					Total claim		Priority amount		Nonpriority amount
2.1			Las	st 4 digits of accoun	t number	\$0	.00		\$0.00	\$0.00
	Priority Cred POB 734		Wh	en was the debt inc	urred?					
		phia, PA 19101-7346 eet City State Zlp Code		af the data fits	411-1101					
		the debt? Check one.	_	of the date you file, Contingent	tne claim is: Chec	ck all that apply				
	Debtor 1 onl	у		Unliquidated						
	Debtor 2 onl	-		Disputed						
	Debtor 1 and	d Debtor 2 only		e of PRIORITY unse	ecured claim:					
	At least one	of the debtors and anothe	, 🗆	Domestic support obl	ligations					
	Check if this	s claim is for a commun	ity debt	Taxes and certain oth	ner debts you owe	the government				
	is the claim su	bject to offset?		Claims for death or po	ersonal injury while	you were intoxicated	d			
	■ No □ Yes			Other. Specify						
	Tes -									
2.2		of taxation	Las	t 4 digits of accoun	t number	\$0	.00		\$0.00	\$0.00
	Priority Cred			en was the debt inc	urred?					
	Richmon	d, VA 23218								
		et City State Zlp Code he debt? Check one.	_	of the date you file,	the claim is: Chec	ck all that apply				
	Debtor 1 only			Contingent						
	Debtor 2 only	-		Unliquidated						
	Debtor 1 and	-		Disputed he of PRIORITY unse	ocured claim:					
	_	of the debtors and another		Domestic support ob!						
		s claim is for a commun		Taxes and certain oth	_	the government				
	is the claim sul			Claims for death or pe			j			
	■ No			Other. Specify						

☐ Yes

Debte	Case 16-13345-BFK Doc or 1 Edward Shihadeh	20 Filed 11/02/16 En Document Page 1	tered 11/02/16 12:35: 4 of 53 Case number (if know) 16-1	52 Desc Majn _{.02/16 8:13AN} 3345
Part	2: List All of Your NONPRIORITY Unse	ecured Claims		
3. D	o any creditors have nonpriority unsecured cla	aims against you?		
	$oldsymbol{J}$ No. You have nothing to report in this part. Subn	mit this form to the court with your other sch	nedules.	
_	Yes.	•		
u: th	ist all of your nonpriority unsecured claims in t nsecured claim, list the creditor separately for each an one creditor holds a particular claim, list the oth art 2.	h claim. For each claim listed, identify what	type of claim it is. Do not list claims at	tready included in Part 1 If more
				Total claim
4.1	Aes/pnc Natl City	Last 4 digits of account number	0004	\$17,100.00
	Nonpriority Creditor's Name	-		
	Po Box 61047 Harrisburg, PA 17106	When was the debt incurred?	Opened 09/09 Last Active 8/04/16	B
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you	did not
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	al	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	8549	\$13,829.00
	Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/00 Last Active 7/20/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only			
	•	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alalm.	
	At least one of the debtors and another	Student loans	u ciaim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you	did not
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you	uid Hot
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	i	
				

Dehtor	Case 16-13345-BFK Doc 20	Filed 11/02/16 En Document Page 1	5.01 5 4	Desc Majn
	Edward Shinaden		Case number (if know) 16-13345	
4.3	Citi Cards Nonpriority Creditor's Name	Last 4 digits of account number		\$3,478.00
	POB 9001016 Louisville, KY 40290	When was the debt incurred?		_
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Costco citil	bank	_
4.4	Discover Financial	1 A A - 11 - 14 A	0404	^
	Nonpriority Creditor's Name	Last 4 digits of account number	9124	\$23,012.00
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 07/99 Last Active 7/31/16	_
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		_
4.5	First Data	Last 4 digits of account number	6000	Unknown
	Nonpriority Creditor's Name 5565 Glenridge Connector NE Ste 2000	When was the debt incurred?		_
	Atlanta, GA 30342			
	Number Street City State ZIp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	-		
	Debtor 1 only	Contingent		
	Debtor 2 only	Untiquidated		
	Debtor 1 and Debtor 2 only	Disputed	-1-1	
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans		
	Check if this claim is for a community debt		and the contract of the contra	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	Other. Specify Lease		

Debtor	Case 16-13345-BFK Doc 20 1 Edward Shihadeh	Filed 11/02/16 En Document Page 1	$h \cap h \prec$	Desc Main
4.6			Case number (if know) 16-13345	
4.0	Jefferson County Comm Nonpriority Creditor's Name	Last 4 digits of account number		\$40.00
	124 East Washington street Charles Town, WV 25414	When was the debt incurred?		_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify ticket		_
4.7	Navient Nonpriority Creditor's Name	Last 4 digits of account number	1525	\$27,372.00
	Attn: Claims Dept Po Box 9500	When was the debt incurred?	Opened 08/11 Last Active 9/01/16	_
•	Wilkes-Barr, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ _{No}	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		_
		Educationa	l	-
4.8	Nonpriority Creditor's Name	Last 4 digits of account number	6417	\$24,682.00
	Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773	When was the debt incurred?	Opened 08/12 Last Active 9/01/16	-
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	Other. Specify		

Educational

	Case.	TO-	-13345-BFK D0C 20		ireie	U 11/02/10 12.35.52	Desc Mail		
Debtor	1 Edwa	rd S	Shihadeh	Document Page 1	L / _{Case}	53 number (if know) <u>16-13345</u>			
4.9	Navient			Last 4 digits of account number	924	6	\$14,582.00		
			ditor's Name						
	Attn: Cla			14/1		ened 08/10 Last Active			
	Po Box		u r, PA 18773	When was the debt incurred?	8/18	3/16	_		
-	Number St	reet	City State ZIp Code	As of the date you file, the claim	is: Che	ck all that apply			
			the debt? Check one.	,		on an inat apply			
	■ Debtor	1 on	lv	☐ Contingent					
	Debtor		•	☐ Unliquidated					
	_		*	Disputed			•		
			d Debtor 2 only	Type of NONPRIORITY unsecure	ad elaim				
			of the debtors and another		ea claim	•			
		if thi	s claim is for a community	Student loans					
	debt				paration a	agreement or divorce that you did not	l		
		n su	bject to offset?	report as priority claims					
	■ No			Debts to pension or profit-shar	ing plans	s, and other similar debts			
	☐ Yes			Other. Specify					
				Education	al		_		
4.1									
0	Wells Fa	argo	Bank Card	Last 4 digits of account number	755	4	\$7,416.00		
			ditor's Name		-				
	Mac F82					ened 08/11 Last Active			
	Po Box			When was the debt incurred?	2/01	1/16	_		
-	Number Str	nes reet (city State Zlp Code	As of the date you file, the claim	ie: Cha	ck all that anniv			
			the debt? Check one.	75 of the date you me, the claim	13. One	ck an that apply			
	■ Debtor			☐ Contingent					
	Debtor :	2 onl	y	Unliquidated					
	_		d Debtor 2 only	☐ Disputed					
			of the debtors and another	Type of NONPRIORITY unsecure	ed claim	•			
				☐ Student loans	J	•			
	debt	if thi	s claim is for a community	_					
		n su	bject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No			☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes			Other. Specify Credit Car	d				
Part 3:	List Ot	hers	to Be Notified About a Debt	That You Already Listed					
				ut your bankruptcy, for a debt that	vou aire	andy listed in Parts 1 or 2 For even	onle if a collection agency		
is tryin	g to collec	t fro	m you for a debt you owe to some	one else, list the original creditor i	n Parts '	1 or 2, then list the collection agen	cy here. Similarly, if you		
			reditor for any of the debts that ye in Parts 1 or 2, do not fill out or s	ou listed in Parts 1 or 2, list the add	iitional c	creditors here. If you do not have a	dditional persons to be		
		0010		, -	. Iiak Aba	Outside of sections			
	d Address and Sco	# P		which entry in Part 1 or Part 2 did you e 4.10 of (Check one):		onginal creditor? : Creditors with Priority Unsecured Cl			
			laza Drive	 ' '	_				
	n Salem			•	Part 2	: Creditors with Nonpriority Unsecure	d Claims		
		•		st 4 digits of account number					
Part 4:			nounts for Each Type of Unse						
6. Total ti	he amount	s of	certain types of unsecured claims	. This information is for statistical	reportin	g purposes only. 28 U.S.C. §159. A	dd the amounts for each		
type of	i unsecure	u Cla	·····						
			Banasada accesso de 1 m est		_	Total Claim			
_		6a.	Domestic support obligations		6a.	\$0.0	<u>0</u>		
	otal ims								
from Pa		6b.	Taxes and certain other debts yo	ou owe the government	6b.	\$ 0.0	0		
		6c.	Claims for death or personal inju	ıry while you were intoxicated	6c.	\$ 0.0			
		6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$ 0.0			
									
		6e.	Total Priority. Add lines 6a throug	h 6d.	6e.	\$ 0.0	n]		
			,		30.	\ \ \	<u>~</u>		

Case 16-13345-BFK Doc 20 Filed 11/02/16 Entered 11/02/16 12:35:52 Desc Main Document Page 18 of 53 Description Page 18 Description Page 18 of 53 Description Page 18 Descripti

	6f.	Student loans	6f.	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	Total Claim 83,736.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6ħ.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	47,775.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	131,511.00

C	Case :	16-13345-BF	K Doc 2	Polymont	02/16 E	Entered 11	/02/16 12	::35:52	Desc Main 8:13A
Fill in this	s inform	nation to identify y	our case:						
Debtor 1		Edward Shiha First Name		dle Name	Last Nam	e			
Debtor 2 (Spouse if, fil	ina)	First Name	Mide	dle Name	Last Nam				
	-	kruptcy Court for t		RN DISTRICT OF \					
Case num	ber 1	6-13345							
(if known)									Check if this is an amended filing
Officia	l For	m 106G							
			ory Con	tracts and	Unexni	ired I eas	242		12/15
Be as com informatio additional	plete a n. If mo pages,	nd accurate as po re space is neede write your name :	ssible. If two red, copy the ad and case numl	married people ar iditional page, fill ber (if known).	e filina toaetl	ner. both are ed	ually respor	sible for si to this page	upplying correct e. On the top of any
		any executory co this box and file th		expired leases? court with your oth	ner schedules	. You have noth	ina else to re	nort on this	form
				if the contacts of le					
exam	ple, ren	ly each person or t, vehicle lease, co i leases.	company with ell phone). See	h whom you have e the instructions fo	the contract or this form in	or lease. Then the instruction b	state what e poklet for mor	ach contra e examples	ct or lease is for (for of executory contracts
Pers	on or c	ompany with who Name, Number, Stree	m you have th	e contract or leas	e State	what the cont	ract or lease	is for	
2.1 Nan	ne								***************************************
Nun	nber	Street							
City			State	ZIP Code					
2.2 Nan	ne		·						
Nun	nber	Street							
City			State	ZIP Code					
2.3 Nan	ne								
Nun	nber	Street							
City			State	ZIP Code					
2.4 Nan	ne				 _				
Nun	nber	Street							
City			State	ZIP Code	····				
2.5 Nan	ne								

Number

City

ZIP Code

State

Street

Desc Main 8:13AM Entered 11/02/16 12:35:52 Case 16-13345-BFK Doc 20 Filed 11/02/16 Fill in this information to identify your case: Debtor 1 **Edward Shihadeh** First Name Middle Name Debtor 2 First Name (Spouse if, filing) Middle Name Last Name United States Bankruptcy Court for the: **EASTERN DISTRICT OF VIRGINIA** Case number 16-13345 (if known) ☐ Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown In line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D. line Name ☐ Schedule E/F, line ☐ Schedule G, line Number Street City ZIP Code 3.2 ☐ Schedule D. line Name ☐ Schedule E/F, line ☐ Schedule G, line Number Street City State **ZIP Code**

C 101	in this information to	a identify your as								
ļ	btor 1									
Dei	5.01	Edward Shift	laden			-				
	otor 2 ouse, if filing)					-				
Uni	ted States Bankrupt	cy Court for the:	EASTERN DISTRICT	OF VIRGINIA		_				
		13345		_		Ch	eck if this is	:		
(If kr	nown)					I	An amende			
		4001				□		ent showing pass of the follo		chapter
	fficial Form						MM / DD/ Y	////		
	<u>chedule I: \</u>									12/15
sup spo atta	plying correct inforuse. If you are sepa ch a separate shee	rmation. If you a arated and you	ible. If two married peo are married and not filli r spouse is not filling wi On the top of any addition	ng jointly, and your s ith you, do not includ	pouse i e infori	is living wi mation abo	th you, incl out your sp	ude informa ouse. If more	tion about space is :	your needed.
1.	Fill in your emplo	yment		Debtor i			Debtor	?∕or nonafilin	8 abonse	
	If you have more than one job, attach a separate page with information about additional employers.	han one job,		■ Employed		===::	☐ Empl	oyed		
		Employment status	☐ Not employed			☐ Not e	mployed			
			Occupation	Manager of resta	urant		·			
	Include part-time, s self-employed wor		Employer's name	Buffalo Wild Win	gs					
	Occupation may in or homemaker, if it		Employer's address	Leesburg, VA 20	176					
			How long employed ti	here? <u>3 years</u>						
Par	t 2: Give Deta	ails About Mon	thly Income							
spou If yo	use unless you are s	eparated. spouse have mo	te you file this form. If y re than one employer, co his form.							_
						Fore	ebtor4	For Debto		
2.	List monthly gros deductions). If not	ss wages, salar paid monthly, c	y, and commissions (be alculate what the monthly	efore all payroll y wage would be.	2.	\$	5,577.00	\$	N/A	
3.	Estimate and list	monthly overti	те рау.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross l	ncome. Add lin	e 2 + line 3.		4.	\$5,	577.00	\$	N/A	

Debto	or 1 Edward Shihadeh		Case number (if known)	<u>16-13345</u>		
	Copy line 4 here	_ 4.	\$ 5,577.00	For Debtor mon-tiling/ \$		
5.	List all payroll deductions:					
	 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	\$ 0.00 \$ 279.50 \$ 0.00 \$ 433.33 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A	- - - -
	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	—— 6.	\$	\$	N/A	_
	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 3,663.84	\$ \$	N/A	_
	 List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm	8c. 8d. 8e.	\$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$	N/A N/A N/A N/A N/A	- - -
	Nutrition Assistance Program) or housing subsidies.		•			
	Specify: 8g. Pension or retirement income	—— ^{8f.} 8g.	\$ <u>0.00</u> \$ 0.00	\$	N/A N/A	
	8h. Other monthly Income. Specify:	8h.		+ \$	N/A	
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$0.00	\$	N/A	-
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	3,663.84 + \$_	N/A	= \$_	3,663.84
	State all other regular contributions to the expenses that you list in Schedule Include contributions from an unmarried partner, members of your household, you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are no Specify:	our depe		ted in Schedul	'e J. +\$	0.00
	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ceapplies				\$	3,663.84
					Combin	
13.	Do you expect an increase or decrease within the year after you file this fo No.	rm?			monthi	y income
	Yes. Explain: The health insurance is an approximation. he Currently without insurance since his estrange					/8.

Fill	in this informat	ion to identify yo	our case:							
Deb	otor 1	Edward Shih	nadeh			Ch	eck if this	ie.		
								nded filing		
	otor 2								ing postpetition chapter	
(Spo	ouse, if filing)						13 expe	nses as of t	the following date:	
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	IA		MM / DI	D/YYYY		
Cas	e number 16	-13345								
(If k	nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	 Exper	ises					12 <i>i</i> *	15
				If two married people ar	e filing together, ho	oth are ec	ually resi	nonsible fo		-
info	ormation. If mo	ore space is ne n). Answer ever	eded, atta	ch another sheet to this i	form. On the top of	any addi	tional pag	jes, write y	our name and case	
Par	Dogost	be Your House	hold							
1.	Is this a join		illoid		-					_
	■ No. Go to	line 2								
			in a conar	ate household?						
	□ ros. Does		iii a sepai	ate nousenous						
			ot file Offici	al Form 106J-2, Expenses	for Connecte Haven	h = (d = 6 D =	-b O			
		ss. Debior 2 mas		ai Fullit 1003-2, Expelises	ior Separate mouse.	noia di De	BDIOI Z.			
2.	Do you have	dependents?	■ No							
	Do not list De	ebtor 1 and	□ Yes.	Fill out this information for	Dependent's relation	onship to	Dep	endent's	Does dependent	
	Debtor 2.		□ 165.	each dependent	Debtor 1 or Debtor	2 .	age		live with you?	
	Do not state t	ihe					uru garaya		□No	
	dependents r								☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
^	n		_						☐ Yes	
3.		enses include people other ti	han	No						
		your depende		Yes						
Π	5-4									
		te Your Ongol		y Expenses µptcy filing date unless y	ou are using this fo	ırm ac a c	unnlomo	nt in a Cha	ntor 13 case to report	_
exp	enses as of a licable date.	date after the i	pankruptc	y is filed. If this is a supp	lemental <i>Schedule</i>	J, check	the box a	t the top of	the form and fill in the	
incl	uda avnancas	naid for with a	non-cach	government assistance if	way know	Tary		HERTALIST PER KARAN		
				luded it on <i>Schedule I:</i> Y		24		全 种制规则		
(Off	ficial Form 108	6I.)				100		Your expe	nses	
		_								
4.	The rental or	r home owners d any rent for the	hip expen	ses for your residence. In	iclude first mortgage	4.	\$		1,000.00	
	If not include	•	o ground o	. 100.			·			
						_	_			
		state taxes		la inaurana		4a.	· 		0.00	
	•	ty, homeowner's maintenance re	-	's insurance ipkeep expenses		4b. 4c.	\$		0.00	
		owner's associat				40. 4d.	\$		0.00	
5.				our residence, such as hor	ne equity loans	5.			0.00	

Debto	r1 <u>Edward</u>	Shihadeh	Case number (if known) 16-13345		
6. U	Jtilities:	·····			
		γ, heat, natural gas	e e	. \$	400.00
	•	ewer, garbage collection	6b	·	400.00
-		e, cell phone, Internet, satellite, and cable services		· : ———	100.00
-	id. Other. Sp		60.	·	100.00
_		sekeeping supplies	6d	·	0.00
		· · ·	7.		600.00
		children's education costs	8.		0.00
		dry, and dry cleaning	9.	·	125.00
		products and services	10.	·	125.00
		ental expenses	11.	\$	100.00
12. T	ransportation To not include o	ı. Include gas, maintenance, bus or train fare. car payments.	12.	\$	300.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
		tributions and religious donations		\$	0.00
	nsurance.	•		·	0.00
D	o not include i	nsurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insura		15a.	\$	0.00
1	5b. Health ins	surance	15b.	\$	0.00
1:	5c. Vehicle in	nsurance	15c.	\$	300.00
1:	5d. Other insu	urance. Specify:	15d.	· .	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		–	0.00
S	specify:		16.	\$	0.00
		lease payments: nents for Vehicle 1	47-	•	
			17a.	·	205.00
		nents for Vehicle 2	17b.	·	0.00
	7c. Other. Sp		17c.	·	0.00
	7d. Other. Sp		17d.	\$	0.00_
18. Y	our payments	of allmony, maintenance, and support that you did not repo	rt as	œ	0.00
10 C	educted from	your pay on line 5, Schedule I, Your Income (Official Form 10	18. 18.	» ——	
		s you make to support others who do not live with you.		\$	0.00
	pecify:		19.	_	
2U. U	ner real prop	perty expenses not included in lines 4 or 5 of this form or on 5			
		s on other property	20a.		0.00
	0b. Real esta		20b.	·	0.00
		homeowner's, or renter's insurance	20c.	·	0.00
		nce, repair, and upkeep expenses	20d.	· 	0.00
		ner's association or condominium dues	20e.	·	0.00
21. O	Other: Specify:		21.	+\$	0.00
22 C	alculate vour	monthly expenses			
	2a. Add lines 4	· ·		\$	2 505 00
		22 (monthly expenses for Debtor 2), if any, from Official Form 106.	1.2		3,505.00
			J-Z	\$	
2	2c. Add line 22	a and 22b. The result is your monthly expenses.		\$	3,505.00
		monthly net income.			
2	3a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,663.84
		r monthly expenses from line 22c above.	23b.	-\$	3,505.00
2:	3c. Subtract v	your monthly expenses from your monthly income.			
2.	The result	t is your monthly net income.	23 c.	\$	158.84
Fo m	or example, do you do do you do	an increase or decrease in your expenses within the year after ou expect to finish paying for your car loan within the year or do you expect terms of your mortgage?	t your mortgage	payment to incre	
	l Yes.	Explain here: Rent is below fair market value because I	ne is living a	t his sister's	home

Case 16-13345-BFK Doc 20 Filed 11/02/16 Entered 11/02/16 12:35:52 Desc Main Document Page 25 of 53

	_
Fill in this information to identify your case:	
Debtor 1 Edward Shihadeh	
First Name Middle Name Last Name Debtor 2	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA	
Case number 16-13345	
(if known)	☐ Check if this is an amended filing
	amended lilling
Official Forms 100Dec	
Official Form 106Dec	
Declaration About an Individual Debtor's Schedules	12/15
If two married people are filing together, both are equally responsible for supplying correct information.	
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false sta	stement concealing property or
obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,	000, or imprisonment for up to 20
years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?	
■ No	
☐ Yes. Name of person Attach Ba	nkruptcy Petition Preparer's Notice,
Declaration	on, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declarate that they are true and correct.	tion and
X /s/ Edward Shihadeh X	
Edward Shihadeh Signature of Debtor 2	
Signature of Debtor 1	
Date November 2, 2016 Date	

Eil	l in this inf	ormation to identify you	r casa:			
De	btor 1	Edward Shihade First Name	Middle Name	Last Name	 	
	btor 2 ouse if, filing)	First Name	Middle Name	Local Norma		
• •				Last Name		
Ųn	ited States	Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
	se number nown)	16-13345				neck if this is an nended filing
_		orm 107	Affairs for Individ	duals Filing for B		
Be info nun	as completermation. It	e and accurate as poss more space is needed, wn). Answer every que	ible. If two married people a attach a separate sheet to stion.	are filing together, both are this form. On the top of any	equally responsible for supp additional pages, write you	4/16 elying correct r name and case
Pa	rt 1: Giv	Details About Your Ma	arital Status and Where You	I Lived Before		
1.	What is ye	our current marital statu	ıs?			
	■ Marri □ Not n	ed narried				
2.	During the	e last 3 years, have you	lived anywhere other than	where you live now?		
	No Yes.	List all of the places you l	ived in the last 3 years. Do n	ot include where you live now	.	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat	Within the	e last 8 years, did you ev ories include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne	gal equivalent in a commun vada, New Mexico, Puerto Ri	ity property state or territory co, Texas, Washington and Wi	? (Community property sconsin.)
	■ No □ Yes.	Make sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
				•		
Pai	rt 2 Exp	lain the Sources of You	r Income			
I .	Fill in the t	otal amount of income yo	u received from all jobs and a	ng a business during this ye all businesses, including part- e together, list it only once un	ar or the two previous calendine activities. der Debtor 1.	dar years?
	□ No					
	■ Yes.	Fill in the details.				
			그는 일이 되는 이 그 아버지는 것이 없는 것이 없다.	公司 、新工厂(1988年)	Debtor 2	
			Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until	■ Wages, commissions, bonuses, tips	\$46,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Cas	se 16-133	45-BFK		11/02/16 Entered	11/02/16 12:35:52	Desc Main 8:13AA
Debtor 1 Ec	dward Shiha	<u>deh</u>	Docume	ent Page 27 of 6	e number (# known) 16-1334	5
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)
For last caler (January 1 to	ndar year: December 31	, 2015)	■ Wages, commissions, bonuses, tips	\$68,000.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	
	dar year befo December 31		■ Wages, commissions, bonuses, tips	\$65,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		Operating a business	
□ No	source and the		me from each source sepa	rately. Do not include income	hat you listed in line 4.	
Yes.	Fill in the deta	ils.				
			Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)	Debtor.2 Sources of Income Describe below.	Gross Income (before deductions and exclusions)
From January the date you	y 1 of current filed for bankı	year until ruptcy:	Rental income	\$3,000.00		
For the calen (January 1 to	dar year befor December 31		Rental income	\$6,000.00		
Part 3: List	t Certain Payn	nents You	Made Before You Filed fo	or Bankruptcy		
6. Are eithe ☐ No.	Neither Deb	tor 1 nor D	s debts primarily consum ebtor 2 has primarily con personal, family, or housel	sumer debts. Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
		days befo	re you filed for bankruptcy,	did you pay any creditor a tota	of \$6,425* or more?	
	_	30 to line 7	=	anid a tatal of 86 405t as	in one or more payments and t	ha tatal amazımtı
	F r	paid that cre not include	editor. Do not include paym payments to an attorney for	ents for domestic support obliq r this bankruptcy case.	gations, such as child support a	and alimony. Also, do
Yes.	Debtor 1 or	Debtor 2 o	r both have primarily con		or after the date of adjustment	. .
				are you pay arry decitor a total	ii or 4000 or moles	
	_	Go to line 7 List below e		paid a total of \$600 or more ans	d the total amount you paid tha	t creditor. Do not
	i	nclude payı	ments for domestic support this bankruptcy case.	obligations, such as child sup	port and alimony. Also, do not	include payments to an

Total amount

paid

Amount you

still owe

Dates of payment

Creditor's Name and Address

Was this payment for ...

Filed 11/02/16 Entered 11/02/16 12:35:52 Desc Main. 8:13AM Case 16-13345-BFK Doc 20 Page 28 of 53 number (# known) 16-13345 Document Debtor 1 Edward Shihadeh **Creditor's Name and Address Dates of payment** Total amount **Amount you** Was this payment for ... still owe paid GM Card Services(citibank) payment of \$1800 \$0.00 \$0.00 ☐ Mortgage on 7/22 ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors Other_ **Discover** Payment of \$1100 \$0.00 \$0.00 □ Mortgage on 8/1, and \$1,000 ☐ Car on 7/18 Credit Card ☐ Loan Repayment ☐ Suppliers or vendors Other__ JP Morgan Chase payment of \$800 \$0.00 \$0.00 ☐ Mortgage on 7/1 and \$800 ☐ Car on 8/1 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Freedom Road payment totaling \$615.00 \$7,000.00 ☐ Mortgage \$615.00 ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount Amount you** Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Dates of payment Total amount Amount you** Reason for this payment

paid

still owe

Include creditor's name

Official Form 107

more than \$600

Charity's Name

Describe what you contributed

Value

Dates you

contributed

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total

Address (Number, Street, City, State and ZiP Code)

		Case 16-13345-BFK D			2/16 Entere	d 11/02/1	6 12:35:52	Desc Ma	ain 11/02/16 8:13AM
De	btor 1	Edward Shihadeh		Document	Page 30 of	53 Case number (if known) 16-13345		
			•					•	
Pa	rt 6:	List Certain Losses							
			_						
15.	or g	iin 1 year before you filed for bank ambling?	ruptcy or	since you filed fo	or bankruptcy, did :	you lose anyti	ning because of the	ft, fire, oth	er disaster,
		No							
		Yes. Fill in the details.							
		scribe the property you lost and	Descrii	oe any insurance	coverage for the I	oss	Date of your	Value	of property
	поч	v the loss occurred			nsurance has paid. I 33 of <i>Schedule A/B:</i>		loss		lost
Pai	t 7:	List Certain Payments or Transfe	ers						
16.	cons	in 1 year before you filed for bank sulted about seeking bankruptcy o de any attorneys, bankruptcy petitior	r preparin	g a bankruptcy p	etition?		• • •	erty to any	one you
		No							
		Yes. Fill in the details.							
	Add Em	son Who Was Paid Iress all or website address son Who Made the Payment, if No		Description and transferred	i value of any prop	perty	Date payment or transfer was made		Amount of payment
		E Law Office of Robert S. Brand		Attorney Fees	and filing fee		8/18 and 8/30		\$2,000.00
	151 Ale	3 King Street xandria, VA 22314 ndt@brandtlawfirm.com		,	, and 3				42,000.00
17.	pron	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
		No							
		Yes. Fill in the details.							
		son Who Was Pald Iress		Description and transferred	i value of any prop	perty	Date payment or transfer was made		Amount of payment
 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other th transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your proinclude gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 									
		son Who Received Transfer Iress		Description and property transfe			ny property or received or debts	Date tra made	nsfer was
	Per	son's relationship to you				paid iii OAC			
19.	bene	in 10 years before you filed for bar officiary? (These are often called ass No			any property to a s	elf-settled tru	st or similar device	of which y	ou are a
		Yes. Fill in the details.		(Danastatian (C.)					
	Nan	ne of trust		nescription and	i value of the prop	erty transferre	od i provincija i kontrolija. Provincija	Date Tra made	ansfer was

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Yes. Fill in the details.

Date of notice

Environmental law, if you

know it

Debte	or 1 Edward Shihadeh	Document Page 32 o	16-13345 number (if known)					
25. F	Have you notified any governmental unit c	of any release of hazardous material?						
- 2	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26. F	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Part '	11: Give Details About Your Business o	r Connections to Any Business						
27. V	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	□ No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.				
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed					
	Philly Rabes 241 N Market Street	sandwich shop	EIN: From-To 2012-2013					
	Frederick, MD 21701		F10III-10 2012-2013	12-2013				
	Nithin 2 years before you filed for bankrupnstitutions, creditors, or other parties. No	otcy, did you give a financial statement t	o anyone about your business? Inc	lude all financial				
	☐ Yes. Fill in the details below.							
	Name Address (Number Street City State and 7/8 Code)	Date Issued						
	(Number, Street, City, State and ZIP Code) 12: Sign Below							
I have are tru with a 18 U.S	e read the answers on this Statement of Figure and correct. I understand that making a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property,	or obtaining money or property by f					
Edw	ard Shihadeh ature of Debtor 1	Signature of Debtor 2						
Date	November 2, 2016	Date						
	ou attach additional pages to Your Statem	nent of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form	107)?				
■ No								

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-. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case number (if known) 16-13345

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

☐ Yes. Name of Person _

Deptor 1 Edward Shihadeh

□ Xes

bage 8

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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		_
Fill in this information to identify your case:		
Debtor 1 Edward Shihadeh		
First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: EASTERN DIST	TRICT OF VIRGINIA	
Case number <u>16-13345</u>		
(if known)		☐ Check if this is an
		amended filing
Official Form 108		
Statement of Intention for Indi	ividuals Filing Under Char	oter 7
otatement of intention for mai	ividuals I lillig Officer Chap	IEF / 12/15
If you are an individual filing under chapter 7, you must	fill out this form if:	
creditors have claims secured by your property, or	in out and form it.	
you have leased personal property and the lease has	not expired.	
You must file this form with the court within 30 days after	er you file your bankruptcy petition or by the dat	e set for the meeting of creditors,
whichever is earlier, unless the court extends to on the form	the time for cause. You must also send copies to	the creditors and lessors you list
If two married people are filing together in a joint case, be sign and date the form.	both are equally responsible for supplying corre	ct information. Both debtors must
sign and date the form.		
Be as complete and accurate as possible. If more space	is needed, attach a separate sheet to this form.	On the top of any additional pages,
write your name and case number (if known).		
Part 1: List Your Creditors Who Have Secured Claims	S	
4. For any analytican that you lloted in Boat 4 of Och adula	D. O. dita a Mile II a Olaina O annu d'a Duna	
 For any creditors that you listed in Part 1 of Schedule information below. 	D: Creditors who have Claims Secured by Prop	erty (Official Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property	
	secures a debt?	as/exempt on Schedule C?
Creditor's Chase Mtg	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	<u>_</u>
Description of 54 Foothill Lane Harpers Ferry,	Retain the property and enter into a	■ Yes
property WV 25425 Jefferson County	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	retain and pay	
•	- Total and pay	
Creditor's Freedom Road Financial	Surrender the property.	□ No
name:	Retain the property and redeem it.	=
Description of Tiger Motorcyle 2013 Tumiph	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property 3,000 miles	Retain the property and [explain]:	
securing debt: fianaced	retain and pay	
·		
Creditor's Wells fargo	_	_
	Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
name: Description of 6330 Koweta Road Fairburn, GA		□ No ■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Debtor 1 Edward Shihadeh	Case number (if known)	16-13345	
securing debt:		_	
Creditor's Wells Fargo Bank Nv Na	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
Description of 54 Foothill Lane Harpers Ferry,	Retain the property and enter into a Reaffirmation Agreement.	■ Yes	
property WV 25425 Jefferson County securing debt:	Retain the property and [explain]: retain and pay	_	
Part 2: List Your Unexpired Personal Property Lease For any unexpired personal property lease that you list in the information below. Do not list real estate leases. You may assume an unexpired personal property lease.	ted in Schedule G: Executory Contracts and Unexpire Unexpired leases are leases that are still in effect; the	e lease period has not yet ended.	
Describe your unexpired personal property leases		Will the lease be assumed?	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Part 3: Sign Below			
Jnder penalty of perjury, I declare that I have indicated	I my intention about any property of my estate that se	cures a debt and any personal	
x /s/ Edward Shihadeh	X Simulation of Balders		
Edward Shihadeh Signature of Debtor 1	Signature of Debtor 2		
Date November 2, 2016	Date		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Document Page 36 of 53 United States Bankruptcy Court Eastern District of Virginia

In re	Edward Shihadeh		Case No.	16-13345	
		Debtor(s)	Chapter	7	

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR			
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:			
	For legal services, I have agreed to accept \$ 1,700.00			
	Prior to the filing of this statement I have received \$ 1,700.00			
	Balance Due \$ 0.00			
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify)			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify)			
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed: Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of			
6.	reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. By agreement with the debtor(s), the above-disclosed fee does not include the following services:			
	Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or			

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

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I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

November 2, 2016	/s/ Robert S. Brandt
Date	Robert S. Brandt 46196
	Signature of Attorney

The Law Office of Robert S. Brandt

Name of Law Firm

1513 King Street
Alexandria, VA 22314

703-342-7330 Fax: 703-229-4132

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,050 (For all Cases Filed on or after 1/01/2015)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

F OF SERVICE
egoing Notice was served upon the debtor(s), the standing Chapter 13 trustee the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class
Signature of Attorney

						A CONTRACTOR OF THE PARTY OF TH
Fill in this	information to identify your case:				irected in this form and	in Form
Debtor 1	Edward Shihadeh	12	22A-1Su	pp:		
Debtor 2 (Spouse, if fili	no)		□ 1. T	here is no pres	umption of abuse	
	ttes Bankruptcy Court for the: Eastern District	of Virginia	а	pplies will be n	o determine if a presum nade under <i>Chapter 7 N</i>	
Case num	ber 16-13345				cial Form 122A-2).	
(if known)					does not apply now be service but it could ap	
			☐ Ch	eck if this is a	n amended filing	
<u>Officia</u>	I Form 122A - 1					
Chapt	er 7 Statement of Your Cu	irrent Monthly Inc	come	е		12/1
attach a ser case numbe qualifying n	lete and accurate as possible. If two married people arate sheet to this form. Include the line number to tr (if known). If you believe that you are exempted fallitary service, complete and file Statement of Exer	which the additional information rom a presumption of abuse becau	applies. use you	On the top of and do not have pring	ny additional pages, write narily consumer debts or	your name and because of
Part 1:	Calculate Your Current Monthly Income					
200	t is your marital and filing status? Check one	only.				
All and Alline and	ot married. Fill out Column A, lines 2-11.		0.44			
_	arried and your spouse is filing with you. Fill		5 2-11.			
	arried and your spouse is NOT filing with you					
_	Living in the same household and are not le					
	Living separately or are legally separated. Fi penalty of perjury that you and your spouse are living apart for reasons that do not include evan	legally separated under nonbar	nkruptcy	law that applie	es or that you and your	
101(10A the 6 mo	e average monthly income that you received from a). For example, if you are filing on September 15, the 6 nths, add the income for all 6 months and divide the to own the same rental property, put the income from tha	month period would be March 1 thro tal by 6. Fill in the result. Do not inclu	ough Aug ide any ir	ust 31. If the amo	ount of your monthly incom ore than once. For exampl	e varied during e, if both
			Colum		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime oll deductions).	e, and commissions (before all	\$	5,572.67	\$	
Colu	ony and maintenance payments. Do not includent B is filled in.		\$	0.00	\$	
of yo from and r	mounts from any source which are regularly ou or your dependents, including child suppo an unmarried partner, members of your househo oommates. Include regular contributions from a in. Do not include payments you listed on line 3.	rt. Include regular contributions old, your dependents, parents, spouse only if Column B is not	\$	0.00	\$	
5. Net i	ncome from operating a business, profession					
0		Debtor 1 \$ 0.00				
	s receipts (before all deductions) hary and necessary operating expenses	-\$ 0.00				
	nonthly income from a business, profession, or fa		>\$	0.00	\$	
	ncome from rental and other real property					
		Debtor 1				
	s receipts (before all deductions)	\$0.00				
	nary and necessary operating expenses	-\$ 0.00				
Net r	nonthly income from rental or other real property	\$0.00 Copy here ->	*	0.00	\$	
7 Inter	est dividends and royalties		\$	0.00	Ψ	

7. Interest, dividends, and royalties

Case 16-13345-BFK Doc 20 Filed 11/02/16 Entered 11/02/16 12:35:52 Desc Main Research Page 39 of 53 Document Edward Shihadeh Case number (if known) 16-13345 Debtor 1 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 5,572.67 5,572.67 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Determine Whether the Means Test Applies to You Part 2: 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 5,572.67 Multiply by 12 (the number of months in a year) x 12 66,872.04 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. VA Fill in the number of people in your household. 1 Fill in the median family income for your state and size of household. 55,055.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14h Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Edward Shihadeh

Edward Shihadeh

Signature of Debtor 1

Date November 2, 2016

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Fill in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Debtor 1 Edward Shihadeh	
Debtor 2 (Spouse, if filing)	According to the calculations required by this Statement:
United States Bankruptcy Court for the: Eastern District of Virginia	■ 1. There is no presumption of abuse.
	☐ 2. There is a presumption of abuse.
Case number 16-13345 (if known)	
Official Form 122A - 2	☐ Check if this is an amended filing
Chapter 7 Means Test Calculation	04/16
To fill out this form, you will need your completed copy of <i>Chapter 7 Statement</i> Be as complete and accurate as possible. If two married people are filing toget space is needed, attach a separate sheet to this form, include the line number	her, both are equally responsible for being accurate. If more
additional pages, write your name and case number (if known). Part 1: Determine Your Adjusted Income	
Copy your total current monthly incomeCopy line 11 from	m Official Form 122A-1 here=> \$ 5,572.67
2. Did you fill out Column B in Part 1 of Form 122A-1?	
■ No. Fill in \$0 for the total on line 3.	
☐ Yes. Is your spouse Filing with you?	
☐ No. Go to line 3.	
☐ Yes. Fill in \$0 for the total on line 3.	
3. Adjust your current monthly income by subtracting any part of your spou household expenses of you or your dependents. Follow these steps:	se's income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you rep expenses of you or your dependents?	orted for your spouse NOT regularly used for the household
■ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
State each purpose for which the lincome was used For example, the income is used to pay your spouse's tax debitor to support other than you or your dependents.	Fillinithe amount you are subtracting from your spouse is income. \$
	\$
	\$
Total.	
	Copy total here≂> \$0.00
Adjust your current monthly income. Subtract line 3 from line 1.	\$5,572.67_

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Debtor 1 Edward Shihadeh Case number (if known) 16-13345

Part 2:	Calculate	Your Deductions	from	Your Income
r all L	Calculate	Tour Deductions	11 0111	Tour income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of vour actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards

You must use the IRS National Standards to answer the guestions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National 6. Standards, fill in the dollar amount for food, clothing, and other items.

570.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person
- X 1 7b. Number of people who are under 65
- 7c. Subtotal. Multiply line 7a by line 7b. 54.00 Copy here=> \$ 54.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person 130
- 7e. Number of people who are 65 or older 0
- 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00
- 7g. Total. Add line 7c and line 7f 54.00 Copy total here=> 54.00

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Debtor 1 Edward Shihadeh

Case number (if known) 16-13345

Loc	al Sta	andards	You must use the IRS Local Standards to an	nswer the quest	ions in line	es 8-15.				
	Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:									
_	 Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses 									
То	answ	er the qu	estions in lines 8-9, use the U.S. Trustee P	rogram chart.						
To f	ind th char	e chart, go t may also	o online using the link specified in the separate be available at the bankruptcy clerk's office.	e instructions fo	or this form	n.				
8.	8. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses									
9.	Hou	sing and	utilities - Mortgage or rent expenses:							
	9a.		e number of people you entered in line 5, fill ir your county for mortgage or rent expenses				\$1,98	87.00		
	9b.	Total ave	erage monthly payment for all mortgages and	other debts sec	ured by yo	our home.				
		contractu	ate the total average monthly payment, add a ally due to each secured creditor in the 60 mounts. Then divide by 60.							
		Name of	the creditor	Average mor	nthly					
		-NONE-		\$\$						
			Total average monthly payment	\$	0.00	Copy here=>	-\$	0.00	Repeat thi amount on line 33a.	
	9c.	Net mort	gage or rent expense.					1		
			line 9b (total average monthly payment) from kpense). If this amount is less than \$0, enter \$			\$	1,987.00	Copy here=>	\$	1,987.00
10.			hat the U.S. Trustee Program's division of liculation of your monthly expenses, fill in				g is incorrect a	nd	\$	0.00
	Exp	olain why:	J							
11.	Loca	al transpo	ortation expenses: Check the number of veh	icles for which y	ou claim a	an ownershi	ip or operating e	xpense.		
	□ o	. Go to lin	e 14.							
	1	. Go to lin	e 12.							
	□ 2	or more.	Go to line 12.							
12.			ation expense: Using the IRS Local Standard enses, fill in the Operating Costs that apply for						\$	250.00

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Debtor 1 Edward Shihadeh Page 45 01 55

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13.	You may	ownership or lease expen not claim the expense if yo n two vehicles.	se: Using the IRS Local u do not make any loan	Standards, or lease pay	calculate the ments on the	e net owne e vehicle.	rship or l In additi	ease ex on, you	pense for each may not claim	n vehicle below. the expense for
Ve	hicle 1	Describe Vehicle 1: _Tig	er Motorcyle 2013 T	umiph 3,0	00 miles fi	anaced				
13a	. Ownersh	ip or leasing costs using IR	S Local Standard			\$	471	1.00		
13b	Do not in	monthly payment for all deb clude costs for leased vehic	les.							
	are contr	ate the average monthly pa actually due to each secure cy. Then divide by 60.				t				
	Nar	ne of each creditor for Vel	nicle 1	Average r	nonthly					
	Fre	edom Road Financial		\$	136.67					
		Total Avera	ge Monthly Payment	\$	136.67	Copy here =>	-\$	136.	Repeat this amount on line 33b.	
13c		cle 1 ownership or lease exp line 13b from line 13a. if this		, enter \$0.		\$	334	1.33	Copy net Vehicle 1 expense here => \$	334.33
Ve	hicle 2	Describe Vehicle 2:								
13d	Ownersh	ip or leasing costs using IRS	S Local Standard			. \$	(0.00		
13e	Average leased ve	monthly payment for all deb ehicles.	ts secured by Vehicle 2.	. Do not incl	ude costs for	-				
	Nan	ne of each creditor for Veh	icle 2	Average r payment	nonthly					
	1. Table 1.	Total Avera	ge Monthly Payment	\$		Copy here => -\$ _		0.00	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease exp line 13e from line 13d. if this		, enter \$0		\$	C	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public tr Transpor	ansportation expense: If y tation expense allowance re	ou claimed 0 vehicles in gardless of whether you	line 11, usi use public	ng the IRS La transportatio	ocal Stand	lards, fill	in the P	ublic \$	0.00
15.	also dedu	al public transportation ex act a public transportation ex more than the IRS Local St	pense, you may fill in w	hat you belie	hicles in line eve is the ap	11 and if y	you clain expense,	n that yo but you	u may may \$	0.00

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Debtor 1 Edward Shihadeh

Case number (if known)

16-13345

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 1,200,00 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 5.00 term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 0.00 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 4,871.33 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

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Debtor 1 Edward Shihadeh Case number (if known) 16-13345

Add	itional Expense Deductions These are additional of					
	Note: Do not include a	any expen	se allowances	listed in lines 6-24.		
25.	Health insurance, disability insurance, and health sinsurance, disability insurance, and health savings according your dependents.	avings acounts that	ccount expens are reasonably	ses. The monthly expenses for health y necessary for yourself, your spouse, or	ſ	
	Health insurance	\$	400.00			
	Disability insurance	\$	0.00			
	Health savings account	+ \$	0.00			
	Total	\$	400.00	Copy total here=>	\$	400.00
	Do you actually spend this total amount?			•		
	No. How much do you actually spend?					
	Yes	\$				
26.	Continued contributions to the care of household of continue to pay for the reasonable and necessary care your household or member of your immediate family while include contributions to an account of a qualified ABLE	and supp no is unab	ort of an elderly ble to pay for su	y, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00
27.	Protection against family violence. The reasonably nafety of you and your family under the Family Violence	ecessary Preventi	monthly expension and Service	nses that you incur to maintain the es Act or other federal laws that apply.		
	By law, the court must keep the nature of these expens	es confide	ential.		\$	0.00
28.	Additional home energy costs. Your home energy coline 8.	sts are in	cluded in your	insurance and operating expenses on		
	If you believe that you have home energy costs that are 8, then fill in the excess amount of home energy costs.	e more tha	an the home en	nergy costs included in expenses on line		
	You must give your case trustee documentation of your amount claimed is reasonable and necessary.	r actual ex	xpenses, and y	ou must show that the additional	\$	0.00
29.	Education expenses for dependent children who ar \$160.42* per child) that you pay for your dependent chipublic elementary or secondary school.					
	You must give your case trustee documentation of your claimed is reasonable and necessary and not already a					
	* Subject to adjustment on 4/01/19, and every 3 years a	after that f	for cases begur	n on or after the date of adjustment.	\$	0.00
30.	Additional food and clothing expense. The monthly higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS	in the IR	S National Star	ctual food and clothing expenses are indards. That amount cannot be more		
	To find a chart showing the maximum additional allowa instructions for this form. This chart may also be availal					
	You must show that the additional amount claimed is re	asonable	and necessary	/.	\$	0.00
31.	Continuing charitable contributions. The amount that instruments to a religious or charitable organization. 26			ntribute in the form of cash or financial	+\$	0.00
32.	Add all of the additional expense deductions. Add lines 25 through 31.				\$	400.00

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Debtor 1 Edward Shihadeh Case number (if known) 16-13345

Jeductio	ons for Debt Payment					
loan	s, and other secured debt, fill in li					
To ca credi	alculate the total average monthly pa tor in the 60 months after you file fo	ayment, add all amounts that are contractually r bankruptcy. Then divide by 60.	due to	each secured		
N	fortgages on your home:					verage monthly
33a. C	Copy line 9b here				> \$	0.00
	oans on your first two vehicles:					
3b. C	Copy line 13b here				> \$	136.67
					> \$	0.00
	ist other secured debts:				-	
Name of e	each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes insurance?		
				□ No		
-N	ONE-			☐ Yes	\$	
-					Ψ.	-
				□ No		
				☐ Yes	\$	
				□ No		
-					_ + \$ _	
					Сору	
33e. To	tal average monthly payment. Add I	ines 33a through 33d	\$	136.67	total here=>	s 136.67
	,,,,		Ľ			
34. Are a	any debts that you listed in line 33	secured by your primary residence, a veh	icle,			
_		support or the support of your dependents?	•			
1000	lo. Go to line 35.	of pourts a graditar in addition to the pourse.				
ш т		st pay to a creditor, in addition to the payments ssion of your property (called the cure amount e information below.				
Name of	the creditor	Identify property that secures the debt		Total cure amount	900000000000000000000000000000000000000	Monthly cure amount
-NONE	i-			\$:	- 60 = \$	
					٦	-
					Сору	
		То	tal \$	0.00	total here=>	\$ 0.0
		s a priority tax, child support, or alimony - ur bankruptcy case? 11 U.S.C. § 507.	that			
■ N	lo. Go to line 36.					
□ Y	es. Fill in the total amount of all of ongoing priority claims, such a	these priority claims. Do not include current or s those you listed in line 19.	r			
	Total amount of all past-due	priority claims	\$	0.00	÷ 60 =	\$ 0.0

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Document Page 47 of 53 Edward Shihadeh Case number (if known) 16-13345 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link for Bankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. ☐ No. Go to line 37. Yes. Fill in the following information. Projected monthly plan payment if you were filling under Chapter 13 100.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees 7.00 (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 7.00 7.00 here=> Average monthly administrative expense if you were filing under Chapter 13 143.67 37. Add all of the deductions for debt payment, Add lines 33e through 36. Total Deductions from Income 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4.871.33 expense allowances Copy line 32, All of the additional expense deductions 400.00 Copy line 37, All of the deductions for debt payment 143.67 **Total deductions** 5,415.00 5,415.00 Copy total here.....=> Part 3: **Determine Whether There is a Presumption of Abuse** 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 5,572.67 39b. Copy line 38, Total deductions 5,415.00 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy Subtract line 39b from line 39a 157.67 157.67 here=>\$ For the next 60 months (5 years) x 60 Copy 39d. Total. Multiply line 39c by 60 39d. 9,460.20 9,460.20

40. Find out whether there is a presumption of abuse. Check the box that applies:

☐ The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.

☐ The line 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.

The line 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41.

*Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

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Edward Shihadeh Case number (if known) 16-13345

			10 100	-10
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	\$ 131,511.00 x .25	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I) Multiply line 41a by 0.25		opy \$ 32,877.75
25	% of y	ne whether the income you have left over after subtracting all allowed dedu our unsecured, nonpriority debt. e box that applies:	uctions is enough to pay	*.
=		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>There</i> Part 5.	is no presumption of abuse	э.
		39d is equal to or more than line 41b. On the top of page 1 of this form, check <i>mption of abuse.</i> You may fill out Part 4 if you claim special circumstances. The		
art 4:	Giv	e Details About Special Circumstances		
		e any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B).	nts of current monthly inco	ome for which there is no
■ N	o. Go	to Part 5.		
ΠY	es. Fill iter	in the following information. All figures should reflect your average monthly expn. You may include expenses you listed in line 25.	ense or income adjustment	for each
	nec	u must give a detailed explanation of the special circumstances that make the excessary and reasonable. You must also give your case trustee documentation or ustments.	xpenses or income adjustme f your actual expenses or in	ents come
	G		erage monthly expense income adjustment	
	_		\$	
	_	37	\$	
	_		\$	
			\$	
art 5:	Sig	n Below		
	By sig	ning here, I declare under penalty of perjury that the information on this statement	ent and in any attachments i	s true and correct.
		Edward Shihadeh Ellaw Shilling		
		ward Shihadeh nature of Debtor 1		
Da	te No	vember 2, 2016		

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Debtor 1 Edward Shihadeh Case number (if known) 16-13345

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2016 to 08/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Buffalow Wild Wings

Income by Month:

6 Months Ago:	03/2016	\$5,144.00
5 Months Ago:	04/2016	\$5,144.00
4 Months Ago:	05/2016	\$5,144.00
3 Months Ago:	06/2016	\$5,144.00
2 Months Ago:	07/2016	\$7,716.00
Last Month:	08/2016	\$5,144.00
	Average per month:	\$5,572.67

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter :	7 :	Liquidation	
\$.	245	filing fee	
:	\$75	administrative fee	
+	\$15	trustee surcharge	
•	205	4-4-16	

\$335 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee + \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee + \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations.

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.